



## State of Maryland

### Advisory Council on Mental Hygiene/Planning Council

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary, DHMH

## MARYLAND ADVISORY COUNCIL ON MENTAL HYGIENE/ PL 102-321 PLANNING COUNCIL

### Minutes

**July 17, 2012**

**Maryland Advisory Council Members:** Gerald Beemer, Sarah Burns, Chair, M. Sue Diehl, Vice Chair; Mike Finkle, Joanne Meekins, Robert M. Pender, Charles Reifsnider

**Maryland Advisory Council Members Absent:** Richard Blair, Jaimi L. Brown, Michele Forzley, Joshana Goga, Edwin C. Oliver, Livia Pazourek, John Scharf, Anita Solomon, Anthony Swetz, Jr., Robert Turner, Sherrie Wilcox

Individuals highlighted as such are resigned members who have not yet been replaced.

**PL 102-321 Council Members Present:** Carol Allenza, Coordinator; T.E. Arthur, Coordinator; Naomi Booker, Peter Cohen, Chicquita Crawford, Herb Cromwell, Kate Farinholt, R. Terence Farrell, Duane Felix, A. Scott Gibson, Alice Harris, Victor Henderson, Michael Ito, Julie Jerscheid, Steven Kinney for Tracee Bryant, Dan Martin, Cynthia Petion, Kathleen Ward, Phoenix Woody

**PL 102-321 Council Members Absent:** Lynn Albizo, Catherine Drake, Vira Froehlinger, Gerri Gray, Diane Herr, Cindy Kauffman, Michael Lang, Sharon Lipford, George Lipman, Jacqueline Powell, Linda Raines, Sarah Rhine, Sheryl Sparer, Jane Walker

**MHA Staff Present:** Brian Hepburn, Robin Poponne, Thomas Merrick, Iris Reeves, Carole Frank, Sudha Sarode, Greta Carter

**Guests and Others:** Adrienne Hollimon, DHMH; Jackie Pettis, ValueOptions; Daphne Klein, On Our Own of Prince George's County; Gail Stansberry

---

c/o Mental Hygiene Administration

Spring Grove Hospital Center – 55 Wade Avenue – Dix Building – Catonsville MD 21228 – (410) 402-8473  
TDD for Disabled – Maryland Relay Service (800) 735-2258

**Healthy People in Healthy Communities**

### **INTRODUCTIONS/ADOPTION OF MINUTES:**

The meeting was called to order by Council Chair, Sarah Burns. Attendees introduced themselves. The draft minutes of the June 19<sup>th</sup> meeting were approved (separately by the Joint Council Officers) with correction. The first announcement should read that Vira Froehlinger is retiring after 55 years in the fields of “public education and health services” and that Alice Harris “the Chief of Family Support and Interagency Services, worked closely with Dr. Froehlinger at the Maryland State Department of Education (MSDE) and will become the designated MSDE representative”. Please note that the approved minutes will be posted on the Mental Hygiene Administration’s (MHA) Web site. [www.dhmh.maryland.gov/mha](http://www.dhmh.maryland.gov/mha) . The Maryland Advisory Council on Mental Hygiene’s link is listed under “Resources”.

### **ANNOUNCEMENTS:**

- The Planning Committee of the Maryland Joint Council will meet on July 17, 2012 at MHA after this meeting to review the draft FY 2013 State Mental Health Plan from 10:30 to 2:00.
- On July 19<sup>th</sup> a work group, comprised of the Joint Council officers and representatives from ADAA’s State Drug and Alcohol Abuse Council, will meet to discuss future efforts toward the creation of a behavioral health council. Legislation of both Councils will be reviewed.
- Hill Day 2012 – Herb Cromwell reported the success of “Hill Day” activities on June 25<sup>th</sup> – 500 advocacy group representatives and interested citizens from across the nation (with Maryland having the largest representation [40+] and as a result, receiving an award) came to Washington, D.C. to advocate for mental health legislation and participate in sessions and workshops on federal behavioral health policy. Nine out of ten Maryland congressional offices were visited as Hill Day participants spoke out in favor of legislative issues such as parity, importance of health technology advancements for mental health, extension of the residential treatment center (RTC) waiver, and the increased utilization of Mental Health First Aid on college campuses.
- Mike Finkle announced that On Our Own of Maryland (OOOMD) has been awarded a SAMHSA grant to conduct a special session on Health Care Reform education on October 25<sup>th</sup>. DHMH leadership will be in attendance. Please save the date and more information will follow in the coming months. For information, please call OOOMD at 410-646-0262.
- Congratulations to new Joint Council officers – Chair, Sarah Burns; Vice Chair, Sue Diehl; Co-Coordination, Carol Allenza and T.E. Arthur.

### **THE DIRECTOR'S REPORT:**

MHA's Executive Director, Brian Hepburn, M.D., provided the following Director's Report:

#### **The National Association of Mental Health Program Directors (NASMHPD) Annual Commissioners Meeting:**

- Dr. Hepburn attended the NASMHPD Annual 2012 Commissioners Meeting. The agenda included efforts and trends of other states. Some states were just beginning to grapple with issues such as increased forensic census in state hospitals while others, like Maryland, were dealing with newer issues such as health care reform. Dr. Hepburn attributed the progressiveness of Maryland to the DHMH and Gubernatorial leadership and the involvement of the stakeholder community.
- The NASMHPD featured, *Kings Park: Stories from An American Mental Institution* – a documentary film by and about a woman who was a former patient at Kings Park in Long Island, New York and returned thirty years later to interview former staff, patients, and family members. This film documented the impact this former institution had on her life and the lives of others. For more information, visit [www.kingsparkmovie.com](http://www.kingsparkmovie.com).
- NASMHPD discussed updates on Health Care Reform and SAMHSA continues to encourage all states to move forward with the Affordable Care Act. The Medicaid expansion of the federal poverty level to 138% and the reduced criminalization of substance abuse are two of many benefits that will impact individuals in the Maryland behavioral health system of care.
- Olmstead ruling (1999), which affirms the rights of individuals to live in their communities rather than remain inappropriately institutionalized, was also an important topic at the conference. Representatives from CMS and the Department of Justice spoke about the challenges and need to increase housing opportunities to facilitate an increase in discharges, particularly among individuals in the court-ordered system. Maryland is looking into ways to increase the availability of affordable housing opportunities such as increased funding for community housing providers, increased residential rehabilitation program capacity, and utilization of rent subsidies.
- Maryland is looked to as a leader in areas such as children's mental health and in the development and utilization of suicide prevention hotlines. A national suicide prevention lifeline is now being implemented across the nation based on the Maryland model.

#### **Behavioral Health Integration Update:**

Workgroups are underway to engage stakeholders in the behavioral health integration process. Chuck Milligan, DHMH's Deputy Secretary of Health Care Financing, continues to lead efforts of moving forward toward behavioral health integrated care. Updates are posted on DHMH's Web site from the Linkages Workgroup which identifies the components of a good system of care. A matrix was developed to include stakeholder's ideas of what an ideal system would be. Council members have been invited to write additional ideas and comments toward this process.

Dr. Hepburn held a discussion with Council members on what an ideal system/Behavioral Health Integration should look like and some of the responses were as follows:

- Clinical model should dictate financial model
- True continuum of care across lifespan; provide more person centered services without a fear of cost
- Consumers having a choice of care (consumer taking more responsibility in their care); should be protected and not provider's choice
- Should have flexibility in financing for the provider, not all tied to fee-for-service (FFS)/ Good outcomes are rewarded
- Funds follow consumer which will provide flexible funding options
- Focus on vulnerable population that need their care integrated
- Shared risk
- Behavioral health needs to be included in the electronic health record system so the consumer's information can be easily accessed
- Funds go to clinical services and not the administration
- Expand continuum of care; customize consumer care to fit each individual
- Alternative medicine
- Flexibility of services
- Continuum of care across systems (DJS, DHR, MSDE)

Joint Council members were, once again, encouraged to give input, join the larger stakeholder meetings, and/or join workgroups. All are invited to find out more about the workgroups, the models of behavioral health integration that are currently being considered by DHMH, and to stay up-to-date regarding Maryland's behavioral health integration efforts at [www.http://dhmh.maryland.gov/bhd/SitePages/integrationefforts.aspx](http://dhmh.maryland.gov/bhd/SitePages/integrationefforts.aspx).

To enhance future Director Report highlights, Dr. Hepburn encourages members to submit questions on topics of interest to Cynthia Petion at [cpetion@dhmh.state.md.us](mailto:cpetion@dhmh.state.md.us).

#### **Retirement Announcements:**

The following DHMH staff have recently retired or are about to retire:

- Alice Hegner, MHA Office of Core Service Agencies Liaison – June 29<sup>th</sup>
- Peter Cohen, M.D., Medical Director, Alcohol and Drug Abuse Administration (ADAA)

The meeting was adjourned.

The Executive Committee did not meet today.

**Please note, the Agenda for the October 16<sup>th</sup> Council meeting will be posted on the Advisory's Council's web page, under the resources section, on MHA's Web site [www.dhmh.maryland.gov/mha](http://www.dhmh.maryland.gov/mha).**